



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. Corporate ID No. 001716181

2. Name of Corporation Alpha Medical Group, Inc.

3. Street Address Principal Business Office:

No. and Street: 555 BRYANT STREET
STE 814

City or Town: PALO ALTO State: CA Zip: 94301 Country: USA

4. Business Phone No.

(650) 200-3107

5. State of Incorporation

State: DE

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541519

6. Brief Description of the Character of Business Conducted in Rhode Island

HELLO ALPHA, INC. (F/K/A ALPHA MEDICAL GROUP INC.), A MANAGEMENT COMPANY, FACILITATES AND PROVIDES TECHNOLOGY AND SUPPORT TO TELEMEDICINE PROFESSIONAL CORPORATIONS IN ADDITION TO FACILITATING THE SALES OF MEDICATION THROUGH

THIRD PARTIES PHARMACY PARTNERS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT, CEO, SECRETARY, CFO	GLORIA LAU	555 BRYANT ST, SUITE 814 PAN ALTO, CA 94301 USA
TREASURER, DIRECTOR	GLORIA LAU	555 BRYANT ST, SUITE 814 PAN ALTO, CA 94301 USA
DIRECTOR	GEORGE UGRAS	530 LYTTON AVE S.304 PALO ALTO, CA 94301 USA
DIRECTOR	KELLY BATTLES	745 OLIVE ST MENLO PARK, CA 94025 USA
DIRECTOR	KRISTEN MORBECK	2001 6TH AVENUE SUITE 3400 SEATTLE, WA 98121 USA
DIRECTOR	RICHARD LIM	245 LYTTON AVE #350 PAN ALTO, CA 94301 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$0.0001	10,000,000.00	2319847
PWP		\$0.0001	4,555,958.00	4555958

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 23 Day of April, 2025 at 10:53:40 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By GLORIA LAU

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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